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CONFIRMATION NO. 4141

<b>SERIAL NUMBER</b> 10/693,290	<b>FILING OR 371(c) DATE</b> 10/23/2003 <b>RULE</b>	<b>CLASS</b> 726	<b>GROUP ART UNIT</b> 2137	<b>ATTORNEY DOCKET NO.</b> 13768.302.1.1
<b>APPLICANTS</b> Christopher J. Kaler, Sammamish, WA; John P. Shewchuk, Redmond, WA; Giovanni M. Della-Libera, Seattle, WA; <i>COJ</i>				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/219,898 08/14/2002 which claims benefit of 60/329,796 10/16/2001 and claims benefit of 60/346,370 10/19/2001 <i>COJ</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>COJ</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/23/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>COJ</i> <i>COJ</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 71
<b>INDEPENDENT CLAIMS</b> 12				
<b>ADDRESS</b> 47973				
<b>TITLE</b> Flexible electronic message security mechanism				
<b>FILING FEE RECEIVED</b> 2462	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	